

# Application for Employment

Ajo Transportation  
1248 N 2<sup>nd</sup> Avenue  
Ajo, Arizona 85321  
520-387-6559

TODAY'S DATE: \_\_\_\_\_

**It is a policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap, or veteran status.**

*Note: Please print your answers in blue or black ink and write neatly.  
All illegible applications may preclude you for consideration.*

Position Applying for: \_\_\_\_\_

## PERSONAL INFORMATION

\_\_\_\_\_  
**First Name** **Middle Name** **Last Name**

**Current Address:**

\_\_\_\_\_  
**Street and Apt #** **City** **State** **Zip Code**

**Permanent Address (if different from above)**

\_\_\_\_\_  
**Street and Apt #** **City** **State** **Zip Code**

\_\_\_\_\_  
**Telephone** **Email**

\_\_\_\_\_  
**Social Security #** **Drivers License No/State**

**I am a U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis:**

YES  NO

**If applicable, please list your VISA # and expiration:** \_\_\_\_\_

**Have you ever been convicted of a FELONY:**  YES  NO

**If you answered yes, please explain:** \_\_\_\_\_

\_\_\_\_\_  
**Have you ever served in the U.S. Military?**  YES  NO

**If yes, please provide the following information:**

**Branch of Service:** \_\_\_\_\_ **Rank at the time of separation:** \_\_\_\_\_

**I served from** \_\_\_\_\_ **TO** \_\_\_\_\_

**Special Honors:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

**EMPLOYMENT HISTORY**

**Present or Most Recent Employer:**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_ May we contact?  YES  NO  
Reason for Leaving: \_\_\_\_\_

**Prior Employer:**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_ May we contact?  YES  NO  
Reason for Leaving: \_\_\_\_\_

**Prior Employer:**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_ May we contact?  YES  NO  
Reason for Leaving: \_\_\_\_\_

**Prior Employer:**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_ May we contact?  YES  NO  
Reason for Leaving: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

## EDUCATION

### High School

\_\_\_\_\_  
Name and Address

Did you graduate?  YES  NO      Attended from : \_\_\_\_\_ to \_\_\_\_\_

If you did not graduate, did you receive your GED?  YES  NO

Special honors or awards: \_\_\_\_\_

### Technical or Vocational School

\_\_\_\_\_  
Name and Address

Did you graduate?  YES  NO      Attended from : \_\_\_\_\_ to \_\_\_\_\_

If you did not graduate, did you receive your GED?  YES  NO

Special honors or awards: \_\_\_\_\_

### College or University

\_\_\_\_\_  
Name and Address

Did you graduate?  YES  NO      Attended from : \_\_\_\_\_ to \_\_\_\_\_

If you did not graduate, did you receive your GED?  YES  NO

Special honors or awards: \_\_\_\_\_

### College or University

\_\_\_\_\_  
Name and Address

Did you graduate?  YES  NO      Attended from : \_\_\_\_\_ to \_\_\_\_\_

If you did not graduate, did you receive your GED?  YES  NO

Special honors or awards: \_\_\_\_\_

**Ajo Transportation**  
**Department of Transportation**  
**Drug & Alcohol Program Participation**

Per Department of Transportation (DOT) Regulation Part 40, Ajo Transportation is required to ask all applicants of all safety-sensitive positions if the applicant has failed or refused a pre-employment DOT Drug or Alcohol Test within the previous two years. The term pre-employment is defined as a period of time in which you were conditionally offered a safety-sensitive position with a DOT employer but failed with part of the DOT testing resulting in the revocation of the employment offer. Please answer the questions in the question boxes #1 and #2.

Question #1

\_\_\_\_\_ I have NOT failed or refused a DOT Drug or Alcohol pre-employment test within the two previous years of this date.

\_\_\_\_\_ I have failed or refused a DOT Drug or Alcohol pre-employment test within the two previous years of this date.

\_\_\_\_\_ Name (Print)

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

\*\*\*\*\*  
Also, as per DOT Regulations, Ajo Transportation is required to investigate the drug and alcohol program participation within the previous two years of its employee's tenure. This regulation allows the previous employers of its new hires to release drug and alcohol program participation information to Ajo Transportation.  
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Question #2

\_\_\_\_\_ I have NOT failed or refused a DOT Drug or Alcohol pre-employment test within the two previous years of this date while working for an employer that was required to follow regulations.

\_\_\_\_\_ I have failed or refused a DOT Drug or Alcohol pre-employment test within the two previous years of this date while working for an employer that was required to follow DOT Regulations.

\_\_\_\_\_ Name (Print)

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

# Applicant Drug Testing Acknowledgment

I understand that as part of my application for employment, I must successfully complete a USDOT drug test as required by 49CFR part 655. I understand that a negative test result is required before I will be able to perform a safety sensitive function. Participation in the federal drug and alcohol testing programs is a condition of employment.

I also certify that I have not had a positive result on a pre-employment drug test in the past two years.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*  
FOR OFFICE USE ONLY  
\*\*\*\*\*

Date Received: \_\_\_\_\_

Date Called: \_\_\_\_\_

Interview Date & Time: \_\_\_\_\_

Hire Packet Received: \_\_\_\_\_

Hire Date: \_\_\_\_\_

Pay: \$ \_\_\_\_\_ per hour